

PTO/SB/82 (01-06)

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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF
CORRESPONDENCE ADDRESS**

| | |
|------------------------|-----------------|
| Application Number | 09/898,313 |
| Filing Date | July 3, 2001 |
| First Named Inventor | Robert Czarnek |
| Art Unit | 3724 |
| Examiner Name | Phong H. Nguyen |
| Attorney Docket Number | 2932-050917 |

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

28289

☒ Please change the correspondence address for the above-identified application to:☐ The address associated with
Customer Number:

OR

| | | | | |
|--|--|-------|---------------------|-------|
| <input checked="" type="checkbox"/> Firm or Individual Name | The Webb Law Firm | | | |
| Address | 436 Seventh Avenue 700 Koppers Building | | | |
| City | Pittsburgh | State | PA | |
| Country | United States | | Zip | 15219 |
| Telephone | 412-471-8815 | Email | webblaw@webblaw.com | |

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

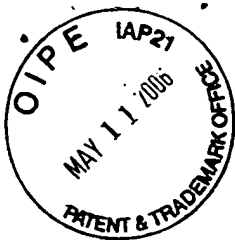
| | | | |
|-----------|--------------------------|-----------|--------------|
| Signature | <i>Frederic I. Orkin</i> | | |
| Name | Frederic I. Orkin | | |
| Date | May 1, 2006 | Telephone | 847-266-0034 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 2 forms are submitted.

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| <input checked="" type="checkbox"/> Firm or Individual Name | The Webb Law Firm | | |
| Address | 436 Seventh Avenue 700 Koppers Building | | |
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| Zip | 15219 | | |

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

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MAY 17 2006

SIGNATURE of Applicant or Assignee of Record

| | | | |
|-----------|----------------|-----------|--------------|
| Signature | | | |
| Name | Robert Czarnek | | |
| Date | 01 Aug 2006 | Telephone | 814-467-7943 |

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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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